10782632

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

480 -003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			7		(Column 2)		1			OR 7		
FOR							1		FEE	┨	RATE	FEE
-			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00°
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		. 9			X\$ 9=	<u> </u>	ОЯ	X\$18=	
INE	DEPENDENT C	LAIMS) m	inus 3 =	2)		X43=		OR	X86=	·
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
• If	the difference	in column 1 is	less than zero, enter "0" in column 2			•	TOTAL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II									<u> </u>	J	OTHER	THAN
	·····	(Column 1)	(Column 2) (Column 3)					SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA	$\left \cdot \right $	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	. 2	Minus	**		=		`X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus			7	$\lfloor \ $	X43=		OR	X86≃	
ـــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L	TOTAL		OR	TOTAL ADDIT, FEE	
	•	(Column 1)		(Colum	n 2)	(Column 3)	,	VDDIT. FEE	-		AUUII. PEE1	
8	, ,,	CLAIMS		HIGHE	ST	PRESENT	ÌΓ	1	ADDI-	1		ADDI-
AMENDMENT B		AFTER AMENDMENT		PREVIO PAID F	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	* .	Minus	8 2		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	П	X43=	7	OR	X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM		1	4.5				
								+145=		OR	+290= TOTAL	
								DDIT. FEE		OR	ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	•	Minus	**		5		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	100			i e	X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7,000	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
11	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."									OR ,	TOTAL ODIT. FEE	
T	he "Highest Num he "Highest Num	mber Previously Paid ber Previously Paid	io For IN THIS I For (Total or	o SPACE is Independer	iess than it) is the	i 3, enter "3." highest number	r toun	d in the appr	opriate box	in colu	ımn 1.	